

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address):      TELEPHONE NO.: _____ FAX NOS.: _____ ATTORNEY FOR (Name): _____	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO JUVENILE COURT</b> <input type="checkbox"/> 2851 MEADOW LARK DR., SAN DIEGO, CA 92123-2792 <input type="checkbox"/> 325 S. MELROSE DR., VISTA, CA 92081-6634 <input type="checkbox"/> 500 3RD AVE., CHULA VISTA, CA 91910-5649 <input type="checkbox"/> 250 E. MAIN ST., EL CAJON, CA 92020-3941	
In The Matter of _____ <div style="text-align: right;">A Minor</div>	
<b>PETITION TO VIEW RECORDS AND/OR REQUEST FOR COPIES (W &amp; I Code 827; CRC Rule 1423, San Diego Superior Court Rules, Chapter 6)</b>	PETITION NO.: _____

I petition the court for permission to inspect the above case file. My relationship to the case is \_\_\_\_\_

\_\_\_\_\_

My reason for this petition is as follows:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I also request the following copies be made:

\_\_\_\_\_

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: \_\_\_\_\_

\_\_\_\_\_  
Name (please print)

Next Hearing Date: \_\_\_\_\_

\_\_\_\_\_  
Signature

**ORDER**

Petition to view is:

\_\_\_\_\_ Granted \_\_\_\_\_ Denied

Request for copies is:

\_\_\_\_\_ Granted \_\_\_\_\_ Denied

Date: \_\_\_\_\_

\_\_\_\_\_  
Judge/Referee/Commissioner